

County: Marathon
 MARYWOOD CONVALESCENT CENTER
 1821 NORTH 4TH AVENUE

Facility ID: 5290

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WAUSAU 54401 Phone: (715) 675-9451

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 88

Total Licensed Bed Capacity (12/31/00): 90

Number of Residents on 12/31/00: 85

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Average Daily Census:

Nonprofit Church-Related

Skilled

No

Yes

85

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		41.2
Supp. Home Care-Personal Care	No					1 - 4 Years		40.0
Supp. Home Care-Household Services	No	Developmental Disabilities	1.2	Under 65	0.0	More Than 4 Years		18.8
Day Services	No	Mental Illness (Org./Psy)	17.6	65 - 74	4.7			-----
Respite Care	No	Mental Illness (Other)	2.4	75 - 84	32.9			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.4		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.9		100.0	(12/31/00)		
Other Meals	No	Cardiovascular	40.0	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	9.4		-----	RNs		13.8
Referral Service	No	Diabetes	8.2	Sex	%	LPNs		10.7
Other Services	No	Respiratory	5.9		-----	Nursing Assistants		
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	7.1	Male	20.0	Aides & Orderlies		
Provide Day Programming for Developmentally Disabled	No		100.0	Female	80.0			
					100.0			

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem		Total
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	1	6.3	\$146.00	0	0.0	\$0.00	1	1.2%
Skilled Care	12	100.0	\$247.00	47	82.5	\$103.02	0	0.0	\$0.00	14	87.5	\$136.00	0	0.0	\$0.00	73	85.9%
Intermediate	---	---	---	10	17.5	\$85.04	0	0.0	\$0.00	1	6.3	\$132.00	0	0.0	\$0.00	11	12.9%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	12	100.0		57	100.0		0	0.0		16	100.0		0	0.0		85	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing	% Totally	Total
Percent Admissions from		Activities of	%	Assistance of	Dependent	Number of
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One Or Two Staff		Residents
Private Home/With Home Health	4.0	Bathing	2.4	81.2	16.5	85
Other Nursing Homes	2.0	Dressing	21.2	70.6	8.2	85
Acute Care Hospitals	91.3	Transferring	32.9	56.5	10.6	85
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	27.1	60.0	12.9	85
Rehabilitation Hospitals	0.0	Eating	63.5	35.3	1.2	85
Other Locations	2.7	*****				
Total Number of Admissions	150	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	7.1	Receiving Respiratory Care		8.2
Private Home/No Home Health	16.7	Occ/Freq. Incontinent of Bladder	36.5	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	8.7	Occ/Freq. Incontinent of Bowel	16.5	Receiving Suctioning		0.0
Other Nursing Homes	4.0			Receiving Ostomy Care		2.4
Acute Care Hospitals	40.7	Mobility		Receiving Tube Feeding		1.2
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	11.8	Receiving Mechanically Altered Diets		31.8
Rehabilitation Hospitals	0.7					
Other Locations	11.3	Skin Care		Other Resident Characteristics		
Deaths	18.0	With Pressure Sores	1.2	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	8.2	Medications		
(Including Deaths)	150			Receiving Psychoactive Drugs		43.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
				50-99		Skilled		Facilities	
	This Facility	Peer Group	Ratio	Peer Group	Ratio	Peer Group	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.4	87.8	1.08	87.3	1.08	84.1	1.12	84.5	1.12
Current Residents from In-County	83.5	82.6	1.01	80.3	1.04	83.5	1.00	77.5	1.08
Admissions from In-County, Still Residing	22.7	25.9	0.87	21.1	1.07	22.9	0.99	21.5	1.05
Admissions/Average Daily Census	176.5	116.8	1.51	141.8	1.24	134.3	1.31	124.3	1.42
Discharges/Average Daily Census	176.5	117.3	1.50	143.0	1.23	135.6	1.30	126.1	1.40
Discharges To Private Residence/Average Daily Census	44.7	43.9	1.02	59.4	0.75	53.6	0.83	49.9	0.90
Residents Receiving Skilled Care	87.1	91.3	0.95	88.3	0.99	90.1	0.97	83.3	1.04
Residents Aged 65 and Older	100	97.1	1.03	95.8	1.04	92.7	1.08	87.7	1.14
Title 19 (Medicaid) Funded Residents	67.1	56.2	1.19	57.8	1.16	63.5	1.06	69.0	0.97
Private Pay Funded Residents	18.8	37.5	0.50	33.2	0.57	27.0	0.70	22.6	0.83
Developmentally Disabled Residents	1.2	0.6	1.89	0.7	1.61	1.3	0.94	7.6	0.15
Mentally Ill Residents	20.0	36.3	0.55	32.6	0.61	37.3	0.54	33.3	0.60
General Medical Service Residents	7.1	21.1	0.34	19.2	0.37	19.2	0.37	18.4	0.38
Impaired ADL (Mean)	40.5	50.8	0.80	48.3	0.84	49.7	0.81	49.4	0.82
Psychological Problems	43.5	50.0	0.87	47.4	0.92	50.7	0.86	50.1	0.87
Nursing Care Required (Mean)	6.6	6.8	0.97	6.1	1.09	6.4	1.03	7.2	0.93